

1. If child is born at a place other than the place of birth, the place of birth must be made in each, and the order of birth stated.

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. 158

Registered No. 158

1. PLACE OF BIRTH

County Gila State Arizona

District or Township Winkelman or Village Winkelman

City Winkelman No. 1 St. 1st Ward 1st

2. Full name of child Edmund Mendoza (If birth occurred in a hospital or institution, give its NAME instead of street and number)
(If child is not yet named, make supplemental report, as directed.)

3. Sex of Child Male To be answered ONLY in event of plural births. 4. Twin, triplet or other No 5. Legitimate? No 6. Date of birth Oct 12 1936

Month Oct Day 12 Year 1936

8. FATHER Full name Robert Mendoza 14. MOTHER Full maiden name Manuela Appadusa

9. Residence (Usual place of abode) Winkelman 15. Residence (Usual place of abode) Winkelman

If non-resident, give place and state. Arizona If non-resident, give place and state. Arizona

10. Color or race Mexican 11. Age at last birthday 25 (Years) 16. Color or race Mexican 17. Age at last birthday 15 (Years)

12. Birthplace (city or place) Benson 18. Birthplace (city or state) Douglas

(State or country) Ariz (State or country) Ariz

13. Occupation Laborer 19. Occupation Servant

Nature of industry Restaurant

20. Number of children of this mother 1 (a) Born alive and now living 0

(b) Born alive but now dead 1 (c) Stillborn 0 21. Were precautions taken against ophthalmia neonatorum. No

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was alive at 1 A m. on the date above stated.

(Born alive or stillborn) Signature Antonia Martinez Mother

(Physician or midwife).

Given name added from a supplemental report. Month, day, year Address Nov 8 1936 P. J. Hutton

Registrar. Filed Nov 8 1936 Registrar.

541-1012-411